

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**Department of the Treasury

Internal Revenue Service

EXTENDED TO NOVEMBER 16, 2015
Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning , and ending Name of foundation A Employer identification number POORTINGA FAMILY FOUNDATION 26-1403397 Number and street (or P O box number if mail is not delivered to street address) **B** Telephone number 811 190TH AVE 641-628-1236 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 50219 PELLA, IA G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated ☐ Section 4947(a)(1) nonexempt charitable trust
 ☐ Other taxable private foundation. under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 903,860. (Part I, column (d) must be on cash basis ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not for charitable purposes (cash basis only) expenses per books income income necessarily equal the amounts in column (a)) Contributions, gifts, grants, etc., received 119,028 N/A 2 Check In the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 3 12,914 12,914 Dividends and interest from securities STATEMENT 4 5a Gross rents b Net rental income or (loss) 57,999 6a Net gain or (loss) from sale of assets not on line 10 Revenue b Gross sales price for all assets on line 6a 254,166. 57,999 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 189.941 70,913 ---12 Total, Add lines 1 through 11 13 0 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees STMT 2 1,680 0. **b** Accounting fees 0 c Other professional fees STMT 8,208 8,208 0. Administrative 17 Interest STMT 4 713 213 0. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 669 0 0. 22 Printing and publications 23 Other expenses Total operating and administrative expenses. Add lines 13 through 23 11,270 8,421 74,673 25 Contributions, gifts, grants paid 74,673 26 Total expenses and disbursements 85,943 Add lines 24 and 25 8.421 74,673. 27 Subtract line 26 from line 12: 103,998 3 Excess of revenue over expenses and disbursements 62,492 b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A

Form **990-PF** (2014)

LHA For Paperwork Reduction Act Notice, see instructions

For	m 99	0-PF (2014) POORTINGA FAMILY FOUNDAT			403397 Page 2
Р	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	
_		-	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	00 554	41 250	41 050
	ı	Savings and temporary cash investments	88,554.	41,250.	41,250.
	3	Accounts receivable -	ł	-	
		Less; allowance for doubtful accounts			
	4	Pledges receivable ►		-	
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	į		
		disqualified persons			
	7	Other notes and loans receivable		- <u>-</u>	
		Less: allowance for doubtful accounts			
şţs	8	Inventories for sale or use			
Assets	1	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 5	579,191.	730,493.	862,610.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	667,745.	771,743.	903,860.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ğ	21	Mortgages and other notes payable			
Ë	ı	Other liabilities (describe)			
			<u> </u>		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
JUC.	25	Temporarily restricted			
3af	26	Permanently restricted			
ğ	20	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	Ŏ.	<u>0.</u>	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	667,745.	771,743.	
et/	30	Total net assets or fund balances	667,745.	771,743.	
Z	30	Total liet assets of fully paralles	007,743.	111,143.	
	94	Total liabilities and net assets/fund balances	667,745.	771,743.	
_	31		· ·	111,143.	
P	art	Analysis of Changes in Net Assets or Fund Ba	ılances ————————		
1	Tota	l net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
	(mu	st agree with end-of-year figure reported on prior year's return)		1	667,745.
2	Ente	r amount from Part I, line 27a		2	103,998.
		r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	771,743.
-		eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	771,743.
					F 000 DE (0044)

11-24-14

T 41. T 1.								
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					acquired rchase mation	(c) Date a (mo., da	cquired ly, yr.)	(d) Date sold (mo , day, yr.)
1a IIBS #00390	a UBS #00390							
b WF #0945	-		-		D P			
c WF #0945					P			
d CAPITAL GAINS D	TVTDENDS				•			
e e	<u> </u>							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1 10	st or other basis expense of sale				ın or (loss) (f) mınus (
a 100,303.			76,24	7.				24,056.
ь 65,939.			63,10		_			2,836.
c 66,365.			56,81	7.				9,548.
d 21,559.								21,559.
e								
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69				ol. (h) gain	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (I) col. (J), if any		col		ot less thar from col. (I	
a								24,056.
b								2,836.
С								9,548.
d								<u>21,559.</u>
e		<u> </u>			<u>-</u>			
2 Capital gain net income or (net capital	tal loss) { If gain, also ente			} 2	ļ			57,999.
3 Net short-term capital gain or (loss)	as defined in sections 1222(5) a	nd (6):						
If gain, also enter in Part I, line 8, co	olumn (c).			,				
If (loss), enter -0- in Part I, line 8	der Section 4940(e) for	. Dadiiaaa	Tay an Nat	3			A\N	
					ment inc	onie		
(For optional use by domestic private for if section 4940(d)(2) applies, leave this	,			00111017				
Was the foundation liable for the section	n 4942 tax on the distributable an	nount of any ye	ear in the base per	10 d ?				Yes X No
If "Yes," the foundation does not qualify	under section 4940(e). Do not co	omplete this pa	art.					
1 Enter the appropriate amount in each	ch column for each year; see the i	instructions be	fore making any e	ntries.				
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying dis	stributions	Net value of no	(c) ncharitab	le-use assets	(Dıstrıb col. (b) dıv	(d) ution ratio ided by col. (c))
2013		0,220.			70 <u>,62</u> 1			.078145
2012		<u>10,470.</u>		6	<u>87,850</u>			015221
2011		<u> 17,923.</u>			<u>64,074</u>			.117341
2010		<u>53,229.</u>			<u>32,477</u>			099970
2009	$\underline{}$	<u>53,531.</u>		5	<u>61,166</u>	·		.291413
2 Total of line 1, column (d)						2		.602090
3 Average distribution ratio for the 5-y the foundation has been in existence		on line 2 by 5,	or by the number	of years		3		.120418
4 Enter the net value of noncharitable	-use assets for 2014 from Part X,	line 5				4		848,373.
5 Multiply line 4 by line 3						5		102,159.
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6	<u>-</u>	625.
7 Add lines 5 and 6						7		102,784.
8 Enter qualifying distributions from F	•					8		74,673.
If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, line	e 1b, and comp	olete that part usin	g a 1% ta 	x rate			

	m 990-PF (2014) POORTINGA FAMILY FOUNDATION 26 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	-140 3 - see			Page 4 1 S)
1a	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	\bot		<u>1,2</u>	<u>50.</u>
	of Part I, line 27b				
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	 			0.
3				1,2	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			4 0	0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			1,2	<u>50.</u>
	a 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 951.	į			
	b Exempt foreign organizations - tax withheld at source				
	c Tax paid with application for extension of time to file (Form 8868)				
	d Backup withholding erroneously withheld			_	- 4
	Total credits and payments. Add lines 6a through 6d			9	<u>51.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
				<u> 2</u>	<u>99.</u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	<u> </u>			
	art VII-A Statements Regarding Activities			Yes	Na
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		1	res	
	any political campaign?		1a		X
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published o	r			
	distributed by the foundation in connection with the activities				77
	c Did the foundation file Form 1120-POL for this year?		1c		<u>X</u>
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.			1	
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. > \$0.				37
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u>X</u>
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				v
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/A	4a		
	b If "Yes," has it filed a tax return on Form 990-T for this year?	IV/A	4D 5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		1		
	If "Yes," attach the statement required by General Instruction T				
6					
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 	,			
	remain in the governing instrument?		6	X	
7			7	X	
′	bid the idditidation have at least \$5,000 in assets at any time during the year. If thes, complete hart in, cor (c), and if art xv		-	- 11	
٥,	a Enter the states to which the foundation reports or with which it is registered (see instructions)				
οá	IA		·		
	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-	· '		
U	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
Q	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calenda	r			
3	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X

		<u>403397</u>	<u> </u>	Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ GAYLE POORTINGA Telephone no. ▶ 641	-628-1	236	
		>50219		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	
-	and enter the amount of tax-exempt interest received or accrued during the year	N	I/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the		L.,	
	foreign country			
Pa	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No	į	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	.		
	a disqualified person?	No l		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X I			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	•		
	for the benefit or use of a disqualified person)?	No		
	(6) Agree to pay money or property to a government official? (Exception Check "No"	"		
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	u.		
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	10		
U	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	A 1b		
	Organizations relying on a current notice regarding disaster assistance check here	<u></u>		_
		_		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?			х
•	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c		Λ_
2	defined in section 4942(j)(3) or 4942(j)(5)):	ľ		
	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
a	before 2014?	,		
	Will be and	10		
	If "Yes," list the years \(\bigs_{\text{\tinx}\text{\tinx}\text{\ti}\text{\texi\text{\text{\text{\text{\texit{\text{\text{\text{\text{\text{\text{\text{\text{\text{\te			
0				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	A <u>2b</u>	-	
G	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	.		
	during the year?	40		
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	_		
	Form 4720, to determine if the foundation had excess business holdings in 2014) N/A	A <u>3b</u>		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		[
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b_		_X_

Total, Add lines 1 through 3

<u> P</u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	861,292.
b	Average of monthly cash balances	1b_	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d_	861,292.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	861,292.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	<u>12,919.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	848,373.
6	Minimum investment return. Enter 5% of line 5	_6_	42,419.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
_	foreign organizations check here and do not complete this part.)		42 410
1	Minimum investment return from Part X, line 6	1	42,419.
2a	Tax on investment income for 2014 from Part VI, line 5 2a 1,250.		
b	Income tax for 2014. (This does not include the tax from Part VI.)	_	1 050
C	Add lines 2a and 2b	2c	1,250.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	41,169.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	41,169.
6	Deduction from distributable amount (see instructions)	6	0.
<u>-</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	41,169.
Ŀ	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>74,673.</u>
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u>74,673.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	74,673.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation (qualifies for the	ne section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

				
,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	Corpus	rears prior to 2013	2013	2014
line 7				41,169.
				41,103.
2 Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only			0.	
b Total for prior years:				
b Total for prior years.		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009 135,551.	ĺ			
b From 2010 32,072.				
c From 2011 45,118.				
d From 2012				
e From 2013 22,236.				
f Total of lines 3a through e	234,977.			
4 Qualifying distributions for 2014 from	20273774		-	
Part XII, line 4. ► \$				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				41,169.
e Remaining amount distributed out of corpus	33,504.			
5 Excess distributions carryover applied to 2014	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below;				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	268,481.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				- -
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously)			
assessed		0.		
d Subtract line 6c from line 6b. Taxable				-
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of	Ĭ			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009			•	
not applied on line 5 or line 7	135,551.			
9 Excess distributions carryover to 2015.	1			
Subtract lines 7 and 8 from line 6a	132,930.			
10 Analysis of line 9				
a Excess from 2010 32,072.])		
b Excess from 2011 45, 118.				
c Excess from 2012	İ			
d Excess from 2013 22, 236.	Ĭ	ĺ		
e Excess from 2014 33,504.				
11-24-14				Form 990-PF (2014)

▶ 3b

Total

Part XVI-A . Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)
E	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b					
c					
d					
e					
•				- 1	•
g Fees and contracts from government agencies					•
2 Membership dues and assessments		· -			
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	12,914.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal			İ .		
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other	1 1				
than inventory			18	57,999.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e		=			
12 Subtotal. Add columns (b), (d), and (e)		0.		70,913.	
13 Total. Add line 12, columns (b), (d), and (e)				13	70,913.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B	Relationship of Activities to the Accomplishment of Exempt Purposes

Line No	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)							
	the foundation 3 exempt purposes (early, main by providing fained for south purposes)							
	<u>. </u>							
	· · · · · · · · · · · · · · · · · · ·							
-								

423621 11-24-14

Form 99			<u>'INGA FAM</u>					<u>403397</u>		ge 13	
Part	XVII	Information Re Exempt Organ		nsfers To a	and Transactions	and Relations	hips With Non	charitable)		
1 Die	d the org	anization directly or indi	rectly engage in any	y of the followin	g with any other organizati	on described in sect	on 501(c) of		Yes	No	
the	Code (other than section 501(c))(3) organizations)	or in section 52	7, relating to political orga	nizations?					
a Tra	ansfers f	rom the reporting found	ation to a noncharit	able exempt or	ganization of						
(1)	Cash							1a(1)		<u>X</u>	
(2)	Other	assets						1a(2)		<u>X</u>	
b Ot	her trans	sactions:									
(1)	Sales	of assets to a noncharita	ble exempt organiz	ation				1b(1)		<u>X</u>	
(2)	Purch	ases of assets from a no	ncharitable exempt	organization				1b(2)		<u>X</u>	
(3)	Renta	of facilities, equipment,	or other assets					1b(3)		_ <u>X</u>	
(4)	Reimt	oursement arrangements						1b(4)		X	
(5)	(5) Loans or loan guarantees										
(6)	Perfor	mance of services or me	embership or fundra	aising solicitatio	ins			1b(6)		<u> X</u>	
	_	facilities, equipment, ma	• .		• •			1c		X	
				-	dule. Column (b) should a				ets,		
					ed less than fair market val	ue in any transaction	or sharing arrangem	ent, show in			
) the value of the goods, (b) Amount involved	,		a avamet arganization	(4)					
(a) Line r	10	(U) Amount involved	(C) Name		e exempt organization	(u) Description	of transfers, transactions	s, and sharing arr	angeme	nts	
				N/A						—	
											
											
-											
	_										
				-							
	_										
2a Is	the four	dation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organ	izations described					
ın	section	501(c) of the Code (other	r than section 501(c)(3)) or in sect	tion 527?			Yes	X	No	
		mplete the following sch									
		(a) Name of org	ganization		(b) Type of organization		(c) Description of rela	itionship			
		N/A									
						<u> </u>					
	T				<u> </u>	<u> </u>					
C:					ig accompanying schedules and n taxpayer) is based on all infori			May the IRS o	iscuss t	his er	
Sign Here		Mare ble	Lata.		101111		7	shown below	(see ins	<u>π</u>)?	
11010		ature of officer or trustee	un_		19////5	1/Tulo	uan	X_Yes	<u> </u>	J No	
	Jaigh			Preparer's s	V Dd yc		Check I If F	PTIN			
		Print/Type preparer's na		Fiehaleiss	ignature	Date	self- employed	THY			
Paid		JOHN A. SC CPA	'UMIDI,'	TORNI A	CCUMITOM	09/09/15		D00470	172		
Prep			OWEN UIT		SCHMIDT, ARK & SMITH,	09/09/15 P.C.	Firm's EIN ▶ 42	P00478			
Use		Time Shame PACG	OWEN, NO.	MDI, CH	WILL OR DESTIN	, F.C.	I IIIII SEIN F 42	11044	, ,		
		Firm's address ▶ 1 6	01 WEST	LAKES P	ARKWAY SIIT	TE 300					
	Firm's address ► 1601 WEST LAKES PARKWAY, SUITE 300										

WEST DES MOINES, IA 50266

(515) 288-3279

Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Name of the organization

Employer identification number

	PO	ORTINGA FAMILY FOUNDATION	26-1403397				
Organiza	ation type (check or	ne)					
Filers of	f:	Section:					
Form 990	0 or 990-EZ	501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 990	0-PF	X 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	nly a section 501(c)(covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e See instructions				
X	_	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's					
Special	Rules						
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II						
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educatively to children or animals. Complete Parts I, II, and III					
	year, contributions is checked, enter h purpose Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled material that were received during the year for an exclusively religious, complete any of the parts unless the General Rule applies to this organization because it e, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box , chantable, etc ,				
but it me	caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), ut it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to ertify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

POORTINGA FAMILY FOUNDATION

26-1403397

Part I	Contributors (see instructions) Use duplicate copies of Part I		1403331
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	POORTINGA INVESTMENTS, LLC 811 190TH AVENUE PELLA, IA 50219	\$\$ <u>30,879.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	STAN & GAYLE POORTINGA 811 190TH AVENUE . PELLA, IA 50219	ss88,149.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
423452 11-	05.14	\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2014)

Employer identification number

POORTINGA FAMILY FOUNDATION

26-1403397

(b) Description of noncash property given OF PUBLICLY TRADED COMPANIES (b)	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$\$	04/03/14
(b)	\$\$	04/03/14
(b)		
Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
OF PUBLICLY TRADED COMPANIES	_	
	\$\$	12/02/14
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_	
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	-	···
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_	
	_ _ _ \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_	
	_	
	(b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given	(b) Description of noncash property given (c) FMV (or estimate) (see instructions) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions)

Employer identification number

ORTING	A FAMILY FOUNDATION			26-1403397		
1	the year from any one contributor. Complete co	dumns (a) through (e) and the to	illowina line	on 501(c)(7), (8), or (10) that total more than \$1,000 for		
•	completing Part III, enter the total of exclusively religious,	charitable, etc. contributions of \$1,00	0 or less for th	e year (Enter this info once) \$		
<u> </u>	Use duplicate copies of Part III if additional	space is needed.				
No.	4.5		ŀ	(a) Proportion of the constant had		
om ert l	(b) Purpose of gift	(c) Use of gift	j	(d) Description of how gift is held		
_ _						
		(a) Transfer of	-:44	·		
		(e) Transfer of	giit			
			_			
	Transferee's name, address, and	d ZIP + 4	R€	Relationship of transferor to transferee		
No. om	(I-) D	(a) Han of with		(a) December of how wife in hold		
art I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
- -						
-						
		(e) Transfer of	aift			
		(e) Transfer Of	giit			
		1 71D 4	ъ.			
-	Transferee's name, address, and	<u> </u>	He	elationship of transferor to transferee		
—						
.			-			
No. om	(b) Purpose of gift (c) Use of gift			(d) Description of how gift is held		
ırt I	(2,1 p = 5 g	(1, 111)		(2,7 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 =		
	<u> </u>					
		(e) Transfer of	gift			
İ	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
-						
		-				
No.	. 1		ſ			
No. om art I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
πι			-			
_]			
		4 3 🖛	-:4			
	(e) Transfer of gift					
	Transferee's name, address, an	d ZiP + 4	Re	elationship of transferor to transferee		
-						
	<u> </u>			Cahadula D (Carro 000, 000, E7, ar 000, DE) (0		

FORM 990-PF DIVIDE	NDS AND INTER	EST FROM SECUR	RITIES ST	PATEMENT 1
GROSS SOURCE AMOUN'		REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
UBS - 00390 WELLS FARGO - 0945 34,4		0. 16. 9. 12,898.		
TO PART I, LINE 4 34,4	73. 21,55	9. 12,914.	12,914.	
FORM 990-PF	ACCOUNTI	NG FEES	S	ratement 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	1,680.	0.		0.
TO FORM 990-PF, PG 1, LN 16	в 1,680.	0.		0.
FORM 990-PF	OTHER PROFES	SIONAL FEES	S	TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	8,208.	8,208.		0.
TO FORM 990-PF, PG 1, LN 16	C 8,208.	8,208.		0.
FORM 990-PF	KAT	TAXES		TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES ON DIVIDENDS FEDERAL EXCISE TAX	213. 500.			0.
TO FORM 990-PF, PG 1, LN 18	713.	213.		0.

FORM 990-PF CORPORATE STOCK		STATEMENT	5
DESCRIPTION	BOOK VALUE	FAIR MARKET	
BROKERAGE ACCOUNT INVESTMENTS	730,493.	862,61	LO.
TOTAL TO FORM 990-PF, PART II, LINE 10B	730,493.	862,610.	
FORM 990-PF PART XV - LINE 1A LIST OF FOUNDATION MANAGE		STATEMENT	6

NAME OF MANAGER

STANLEY POORTINGA GAYLE POORTINGA

POORTINGA FAMILY FOUNDATION

Part XV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient PUBLIC CHARITY RELIGIOUS N/A UNIVERSITY OF NORTHWESTERN - ST. PAUL LIFE 107.1 ST PAUL, MN 55113 360. **Total from continuation sheets** 360

1 1 b					Dona O	
Form 8868 (Rev. 1-2014)	tonsion /	complete only Part II and check this	box		Page 2 ► X	
 If you are filing for an Additional (Not Automatic) 3-Month Ex Note. Only complete Part II if you have already been granted an a 				8888		
 If you are filing for an Automatic 3-Month Extension, comple 			ea i oiiii	0000		
Part II Additional (Not Automatic) 3-Month E			al (no c	opies nee	eded).	
				lentifying number, see instructions mployer identification number (EIN) o		
rint					,	
le by the POORTINGA FAMILY FOUNDATION				26-1403397		
ue date for Number, street, and room or suite no. If a P.O. box, see instructions.			Social se	Social security number (SSN)		
filing your return See 811 190TH AVE				•	, ,	
instructions City, town or post office, state, and ZIP code For a fe	oreign add	Iress, see instructions	-			
PELLA, IA 50219						
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
Application	Return	Application			Return	
Is For	Code	Is For	_		Code	
Form 990 or Form 990-EZ	01					
Form 990-BL	02	Form 1041-A			08	
Form 4720 (Individual)	03	Form 4720 (other than individual)			09	
Form 990-PF	orm 990-PF 04 Form 5227				10	
Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069					11	
Form 990-T (trust other than above) 06 Form 8870					12	
STOP! Do not complete Part II if you were not already granted	d an autor	matic 3-month extension on a previ	ously file	d Form 88	68	
GAYLE POORTING	A					
 The books are in the care of ► 811 190TH AVEN 	<u>UE -</u>	PELLA, IA 50219				
Telephone No ► <u>641-628-1236</u>		Fax No 🕨				
 If the organization does not have an office or place of busines 					L	
If this is for a Group Return, enter the organization's four digit	n '	•				
box ► If it is for part of the group, check this box ►		ach a list with the names and EINs of	all memb	ers the exte	ension is for	
4 I request an additional 3-month extension of time until	<u>NOVEM</u>	BER 15, 2015				
5 For calendar year 2014 , or other tax year beginning		, and ending	1			
6 If the tax year entered in line 5 is for less than 12 months, o	check reas	on. Initial return	Fınal ı	eturn		
Change in accounting period						
7 State in detail why you need the extension		DE 3 COMPT EME 33TD	A COLLEGE	3 M D D T		
ADDITIONAL TIME IS NEEDED TO	PREPA	RE A COMPLETE AND	ACCUR	ATE RE	TURN.	
			-			
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720	0.000	enter the tentatue tay loss any		·		
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720 nonrefundable credits. See instructions.	, or 0005,	enter the tentative tax, less any	8a	s	800.	
b If this application is for Forms 990-PF, 990-T, 4720, or 6069	0 enter an	v refundable credits and estimated	- Oa	Ψ	000.	
tax payments made Include any prior year overpayment al				 		
previously with Form 8868	nowed as	a credit and any amount paid	8b	s	951.	
C Balance due. Subtract line 8b from line 8a Include your pa	avment wi	th this form if required by using	- 65	Ι Ψ		
EFTPS (Electronic Federal Tax Payment System) See instr	•	are the form, it required, by doing	8c	s	0.	
		st be completed for Part II o		<u> </u>	<u></u>	
Under penalties of perjury, I declare that I have examined this form, include			-	of my knowle	dge and belief.	
it is true, correct, and complete, and that I am authorized to prepare this f	orm.			,	. .	
Signature ▶ Title ▶	CPA		Date			

Form 8868 (Rev 1-2014)